

## **Incident Report**

Print Date/Time: 11/10/2016 12:11

Login ID: ss0139 Lake Stevens Police Department

**ORI Number:** WA0311900

Incident: 2016-00021933

Incident Date/Time: 11/4/2016 1:54:00 PM

Location: 3200 BLK 113TH AVE NE LAKE STEVENS WA 98258

Phone Number: Report Required: Yes

**Prior Hazards:** No LE Case Number:

Incident Type: Collision Venue: Lake Stevens

3

Source: 911 Priority: 3

Status: Nature of Call:

Unit/Personnel

Unit Personnel 19S15 SS0112-Warbis

Person(s)

No.	Role	Name	Address	Phone	Race	Sex	DOB
1	Involved Party	2E21					
2	Involved Party	MELLING, WENDY W	516 VIEW RIDGE DR Everett WA 982031822	(425) 259-1925	White	Female	05/10/1938
3	Involved Party	STRATMEYER, SAMANTHA L	3520 112TH CT NE	(425) 343-7440		Female	01/10/1999
1	Passenger	MOSE, RYDER C	LAKE STEVENS WA 98258			Male	02/19/2009
2	Passenger	MOSE, CARTER P				Male	03/09/2007

Vehicle(s)

Role	Туре	Year	Make	Model	Color	License	State
Involved Vehicle	Passenger Car	1995	Toyota	PU		B85189L	WA
Involved Vehicle	Passenger Car	2003	Lincoln- Continental	Navigator		AAL2882	WA

Disposition(s)

Disposition Count

R

Property

Date Code Туре Make Model Description Tag No. Item No.

## **CAD Narrative**

11/04/2016: 13:56:03 SP0368 Narrative: AGENCY ADVISED

11/04/2016: 13:55:07 SP0224 Narrative: AC INFO FROM 2E21 2 VEH NONINJ PART BLKING ON 113TH IFO LOC. SM TRK VS

MINI VAN

	STATE OF WASHINGTON POLICE TRAFFIC COLLISION REPORT 1591971  REPORT NO. E604822	1 2 3 27
	INTERSTATE CITY STREET V FIRE RESULTED CASE # 2016-00021933	2
1 1	STATE ROUTE OTHER STOLEN VEHICLE LOCAL AGENCY CODING	3
2 1	COUNTY RD PRIVATE WAY INVOLVED TOTAL # OF CO. OBJECT	2 3 28
31	TRIBAL UNITS 02 STRUCK  M M D D Y Y Y Y TIME (2400) COUNTY# MILES CITY#	2
<u> </u>	DATE OF COLLISION 11 - 04 - 2016 1355 31 S W OF W OF W 0664	3
4	ON (PRIMARY TRAFFIC WAY)  INTERSECTION NON-INTERSECTION BLOCK NO.	
4a	MILE POST 3200	1 2 29
5	DISTANCE  OF (REFERENCE OR CROSS STREET)  OF (REFERENCE OR CROSS STREET)  OF (REFERENCE OR CROSS STREET)	
	UNIT 01 MOTOR VEHICLE PHONE DAMAGE THRESHOLD MET YES V NO DE 4252591925 N: 4258760839	0 1 30
6 1	LAST NAME MELLING FIRST NAME WENDY MIDDLE INITIAL	
	STREET NEW ADDRESS 516 VIEW RIDGE DR	
7	CITY EVERETT ST WA ZIP 982031822	1 2 31
8	CDL RESTRICTIONS ENDORSEMENTS	2
9 9	DRIVER'S LICENSE # MELLIW*622KS STATE WA SEX F D.O.B. MDDYYYY 05 _ 100 _ 1938	3
10 9	ON DUTY STATUS AIRBAG 2 RESTR. 4 EJECT 1 HELMET USE INJURY 1 NATURE OF INJURIES	1 2 32
11 2 5	LICENSE PLATE # AAL2882 STATE WA VIN# 5LMFU28R13LJ30233	2
12 2 5	TRAILER PLATE # STATE TRAILER PLATE # STATE	3
13 2	VEH. YEAR 2003 MAKE LINC MODEL NAVGTR STYLE VEHICLE TOWED YES NO TOWED BY  REGISTERED OWNER INFO. CLIFTON MELLING 516 VIEW RIDGE DR EVERETT WA 98203  VEHICLE NO. 1	5 1 33
14 2	LIABILITY INSURANCE INSURANCE O SAFECO H2263916 INSURANCE O SPOLICY # JOSEPH STATE OF THE PROPERTY OF THE PROP	5 1 <sub>34</sub>
15 2	VEHICLE YES NO CITATION # CHARGE  CHARGE  TO BOTTOM  TO	4 35
16 2	ONTI UZ VEHICLE CYCLE PEDESTRIAIN OWNER PESEV NO D: 425343/440	4 35
17	LAST NAME INITIAL INITIAL	37
17	STREET NEW ADDRESS 3520 112TH CT NE	38
18	CITY LAKE STEVENS ST WA ZIP	39
19	CDL RESTRICTIONS ENDORSEMENTS	40
20	DRIVER'S LICENSE # STATE SEX F D.O.B. MMDDYYYY 01 - 10 - 1999	
21	ON DUTY STATUS AIRBAG 2 RESTR. 4 EJECT 1 HELMET USE INJURY 1 NATURE OF INJURIES	
22	LICENSE PLATE # B85189L STATE WA VIN# 4TAVN53F2SZ069688	
23	TRAILER PLATE # STATE TRAILER PLATE # STATE	1 41
24	VEH. YEAR 1995 MAKE TOYT MODEL PU STYLE PC VEHICLE TOWED YES NO TOWED BY  REGISTERED OWNER INFO. ERIC STRATMEYER 3520 112TH CT NE LAKE STEVENS WA 98258	1 42
	REGISTERED OWNER INFO. ERIC STRAIMEYER 3520 1121H CI NE LAKE STEVENS WA 98258  VEHICLE NO. 2 SHADEW DAMAGED AREA  LIABILITY INSURANCE  INSURANCE OF FARMERS NI HEFFECT  9 TOP  9 TOP  1 TO THE TO THE TOTAL TH	
25	VEHICLE YES NO CITATION # CHARGE  STANDING  8 7 6	
26	OFFICER'S NAME (PRINT) S. WARBIS  BADGE OR ID # AGENCY WA0311900  AGENCY WA0311900	
	PART A 3000-345-159 R (7/06)	





CORRECTION

REPORT NO.

E604822

CASE #

2016-00021933

ADDITIONAL PERSONS INVOLVED (PASSENGERS AND/OR WITNESSES ONLY)							
NAME (LAST, FIRST, MIDDLE INITIAL)	MOSE RYDE	R C					
ADDRESS & PHONE #						SEX M D.O.B. MMDDYYYY 02 - 19 - 2009	
PASSENGER WITNESS UNIT	·# 1	SEAT POS. 4	AIRBAG 2	RESTR. 4	EJECT 1	HELMET USE CLASS 1 NATURE OF INJURIES	
NAME (LAST, FIRST, MIDDLE INITIAL)	MOSE CART	TER P					
ADDRESS & PHONE #						SEX M D.O.B. MDDYYYY 03 - 09 - 2007	
PASSENGER WITNESS UNIT	# 1	SEAT 6	AIRBAG 2	RESTR. 4	EJECT 1	HELMET USE CLASS 1 NATURE OF INJURIES	
NAME (LAST, FIRST, MIDDLE INITIAL)	NAME						
ADDRESS & PHONE #						SEX D.O.B. MMDDYYYY	
PASSENGER WITNESS UNIT	#	SEAT POS.	AIRBAG	RESTR.	EJECT	HELMET INJURY NATURE OF INJURIES CLASS	
			N/	ARRATIVE	'		
and 36th, also north by Unit 2. Both unit						and was struck on the front left fender ported.	
CERTIFY (DECLARE) UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF WASHINGTON THAT THE FOREGOING IS TRUE AND CORRECT. (RCW 9A.72.085)							
S. WARBIS NVESTIGATING OFFICER'S SIGNATURE		UNIT OR DIS	T. DET	11-04-16 DATED		PLACE SIGNED	
APPROVED BY  BOB SUMMERS 0079					DATE	11/6/2016 5:31:57 AM	

TIME POLICE DISPATCHED 1:56 PM

TIME POLICE ARRIVED 2:00 PM

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ORI#

WA0311900

BADGE OR ID # 0112

**REPORT NO.** E604822

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DATE AND TIME 0F COLLISION 11/04/16 13:55

